

Pica Information Sheet

What is Pica?

'Pica' comes from the Latin word for 'magpie', a bird which is known for indiscriminate eating. There are various definitions of pica but the most commonly used is the repeated consumption of non-edible items or items with no nutritional value. Children younger than 18-24 months might try to eat non-food items, and this is not necessarily considered abnormal at that age - they are simply exploring new objects. In some cultures (India, Africa and South America) pregnant women have been known to consume various substances e.g. clay and mud, in response to cravings.

Pica and ASC's

There are many reasons why a person with and Autism Spectrum Condition (ASC) might experience Pica and these may include; seeking out sensory input, not being able to distinguish between edible and inedible items, vitamin deficiency, to soothe anxiety and avoid demands.

Does my child have Pica?

In children, Pica can become a problem if the behaviour is present for at least a month and no longer seems consistent with the developmental stage of the child. Here are some examples of non-food items that children might eat:

- Soil, clay, glass, sand, chalk
- Ice
- Hair, fluff
- Paint chips, plaster, glue
- Fluff
- Buttons, paperclips
- Paper
- Baking soda
- Pencils, pencil shavings
- Coffee grounds
- Toothpaste, soap
- Faeces

How common is Pica?

It is estimated that as many as 9-25% of children with developmental difficulties including autism may develop Pica (Ali, 2001).

Who is affected?

Pica is found across all cultures, ethnic groups and socio-economic backgrounds.

What causes Pica?

The causes of Pica are unclear. There are many theories about what might cause the behaviour and some of these may overlap:

- Nutritional factors: iron and/or zinc deficiency has been found to be associated with cravings for non-food items, in an attempt to correct the mineral balance.
- Developmental factors: it might be that the individual has not moved on from the early developmental stage of mouthing items giving comfort/satisfaction. Children with autism and other learning difficulties might be more susceptible to developing Pica.
- Environmental factors: stressful events, lack of active participation in activities (e.g. boredom) and limited social interaction
- Sensory factors: children may be drawn to eating objects with certain sensory characteristics that they find satisfying e.g. smell, taste, texture.
- Mental health factors: Pica has been observed in people with obsessive-compulsive disorder, depression and anxiety.

What are the risks?

Although some of these items are harmless (e.g. ice, baking soda), some clearly pose risks to the health and safety of the child. Pica-related behaviours might be perceived as strange and/or unusual by peers, leading to social isolation.

What help is available?

If you are worried about your child's eating habits, the first point of call will be your GP or health visitor. They might be able to give you some information about the behaviour and suggest some initial tests to check for mineral deficiencies. They may also suggest a referral to a local specialist service e.g. CAMHS (Child and Adolescent Mental Health Service) and/or Integrated Disability Service. In an emergency i.e. if your child has taken a harmful substance or if they are choking on an object, seek medical care immediately.

What treatment might be offered?

When a child presents with Pica, they will be assessed individually to try to understand what may be causing the condition. It is useful for parents to keep a record of items the child eats, where and when they eat them and characteristics of the items. It is quite common that behavioural strategies might be recommended to manage the Pica at home and in school settings.

Strategies might include:

- 1. **De-Pica and make safe the immediate environments** (e.g the house, garden etc)
- 2. **Discrimination training** teaching the child to discriminate between edible and nonedible items and making them aware of the dangers some substances present to them. Pictures can be a helpful way to present this information to children. Encourage the child to pause and think about what they are putting in their mouth. This might help the child to consider the nature of the selected item and whether to eat or throw it away.
- 3. **Pica Box** offering the child alternative edible food items with a similar texture to replace inedible ones. Replacement foods might include rice/apple paper, edible sand and mud, and liquorice wood (recipes available on the Internet). One can also try acceptable items to chew such as 'chewies' if children are looking for sensory stimulation chewable T shaped rubber items designed so they cannot be swallowed. Seeds of different kind are popular, too sesame seeds, pumpkin seeds, to replace the texture of dirt.
- 4. **Positive reinforcement** developing a reward system for when the child successfully resists eating a non-edible item.
- 5. **Environmental protection** taking steps to remove items that present a health and safety risk from the child's home and school settings. This might include carrying out an audit of all areas used by the child, e.g. poisonous plants in the playground and/or garden being removed, and then setting boundaries restricting the child's access to areas of high risk.
- 6. **Social Environment** it may be necessary to consider the child's social environment at home and at school and whether they have sufficient levels of social interaction. This might include thinking about involvement with peers, participation in physical activities and sensory stimulation (e.g., safe sensory toys).

Will my child get better?

It may be that the pica behaviours reduce or even stop as the child gets older.

When pica occurs alongside a developmental disorder such as autism, it can be a more prolonged concern but progress can be made with appropriate education and management.

Further information

The National Autistic Society - www.autism.org.uk

The West Midlands Autistic Society. (WMAS) - Tel: 0121 426 4225

Information about other services will be available from your GP.